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Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			C mplete if Known		
			Application Number	09/762,976 09/762,926	
			Filing Date	June 11, 2001	
			First Named Inventor	Thonnard	
			Group Art Unit	1645	
			Examiner Name	Shahnan	
Sheet	2	of	2	Attorney Docket Number	BM45330

[illegible]

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

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